

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

KATINA R ANDERSON

Debtor(s)

Case No. 09-31622

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/27/2009.
- 2) The plan was confirmed on 10/14/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 10/03/2012.
- 6) Number of months from filing to last payment: 37.
- 7) Number of months case was pending: 43.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$36,600.00.
- 10) Amount of unsecured claims discharged without payment: \$17,660.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$32,939.79
Less amount refunded to debtor	\$1,611.32

NET RECEIPTS: \$31,328.47

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,499.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,738.00
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$5,237.00

Attorney fees paid and disclosed by debtor: \$1.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE HEALTH CENTER	Unsecured	350.00	NA	NA	0.00	0.00
ADVOCATE HEALTH CENTER	Unsecured	140.00	NA	NA	0.00	0.00
ADVOCATE SOUTH SUBURB HOSPIT	Unsecured	7,000.00	NA	NA	0.00	0.00
AMERICASH LOANS LLC	Unsecured	4,144.00	2,378.67	2,378.67	2,378.67	0.00
AT&T	Unsecured	191.00	NA	NA	0.00	0.00
AVON PRODUCTS	Unsecured	308.00	NA	NA	0.00	0.00
CAPITAL RECOVERY	Unsecured	300.00	NA	NA	0.00	0.00
CASH YES	Unsecured	650.00	NA	NA	0.00	0.00
CITIZENS BANK	Unsecured	275.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	300.00	638.00	638.00	638.00	0.00
CITY OF MARKHAM	Unsecured	1,000.00	NA	NA	0.00	0.00
CITY OF MARKHAM	Unsecured	200.00	NA	NA	0.00	0.00
COMED	Unsecured	587.00	NA	NA	0.00	0.00
ECMC	Unsecured	NA	4,136.66	4,136.66	4,136.66	0.00
GC SERVICES DATA CONTROL	Unsecured	424.00	NA	NA	0.00	0.00
GRTEEN PICKET	Unsecured	575.00	NA	NA	0.00	0.00
INGALLS MEMORIAL HOSPITAL	Unsecured	300.00	NA	NA	0.00	0.00
INGALLS MEMORIAL HOSPITAL	Unsecured	824.00	NA	NA	0.00	0.00
INSTANT LOANS NOW	Unsecured	520.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	NA	910.57	910.57	910.57	0.00
INTERNAL REVENUE SERVICE	Unsecured	400.00	209.85	209.85	209.85	0.00
INTERNATIONAL EQUITY GROUP	Unsecured	375.00	NA	NA	0.00	0.00
MIDLAND CREDIT MANAGEMENT IN	Unsecured	914.00	915.74	915.74	915.74	0.00
NATIONWIDE CASH	Unsecured	520.00	NA	NA	0.00	0.00
NICOR GAS	Unsecured	760.00	760.71	760.71	760.71	0.00
PAYDAY LOAN STORE OF IL INC	Unsecured	1,280.00	NA	NA	0.00	0.00
PREMIER BANK CARD	Unsecured	329.00	329.16	329.16	329.16	0.00
QUEST DIAGNOSTIC	Unsecured	105.00	NA	NA	0.00	0.00
RADIOLOGY IMAGING CONSULT	Unsecured	150.00	NA	NA	0.00	0.00
SALUTE VISA GOLD	Unsecured	611.00	NA	NA	0.00	0.00
TIDEWATER FINANCE COMPANY	Secured	7,400.00	7,400.00	7,400.00	7,400.00	146.01

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
TIDEWATER FINANCE COMPANY	Unsecured	4,016.00	4,278.61	4,278.61	4,278.61	0.00
TRACY AMBULANCE SERVICE	Unsecured	156.00	NA	NA	0.00	0.00
TRIBUTE MASTERCARD	Unsecured	629.00	NA	NA	0.00	0.00
UNITED STUDENT AID FUNDS	Unsecured	NA	3,987.49	3,987.49	3,987.49	0.00
WOMENS HEALTHCARE	Unsecured	190.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$7,400.00	\$7,400.00	\$146.01
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$7,400.00	\$7,400.00	\$146.01
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$910.57	\$910.57	\$0.00
TOTAL PRIORITY:	\$910.57	\$910.57	\$0.00
GENERAL UNSECURED PAYMENTS:	\$17,634.89	\$17,634.89	\$0.00

Disbursements:

Expenses of Administration	<u>\$5,237.00</u>	
Disbursements to Creditors	<u>\$26,091.47</u>	
TOTAL DISBURSEMENTS :		<u>\$31,328.47</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/19/2013

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.